



Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital Owner and Year of Report per [Section 130061\(e\)](#)

| | |
|------------------|---|
| Facility Number: | <input type="text" value="10458"/> |
| Facility Name: | <input type="text" value="St. Jude Medical Center"/> |
| Address: | <input type="text" value="101 E. Valencia Mesa Dr."/> |
| City: | <input type="text" value="Fullerton"/> |

| | |
|----------------------------|--|
| Hospital Owner/Licensee: | <input type="text" value="St. Jude Medical Center / St. Joseph Health"/> |
| Year of Reporting: | <input type="text" value="2019"/> |
| Contact 1 e-mail Address: | <input type="text" value="[Confidential data left blank intentionally.]"/> |
| Contact 2 e-mail Address: | <input type="text" value="[Confidential data left blank intentionally.]"/> |
| Contact 3 e-mail Address:: | <input type="text" value="[Confidential data left blank intentionally.]"/> |
| Name of Submitter: | <input type="text" value="Bill Eveloff"/> |
| Submission Date: | <input type="text" value="10/5/2019 7:49:58 PM"/> |

For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per [130061\(c\)\(1\)\(A\)](#). The deadline, as described in [Section 130060](#) or [130061.5](#),for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per [Section 130061\(c\)\(1\)\(B\)](#)

| Bldg. No. | Building Name | Alternate Building Address | Building Resolution | Final SPC Rating If Required | Extension Date | Anticipated Completion Date |
|-----------|--|----------------------------|---------------------|------------------------------|----------------|-----------------------------|
| BLD-02424 | Main Building / Canopies / Boiler Room | 101 E. Valencia Mesa Dr. | Rebuild | SPC5 | 01/01/2020 | 12/01/2019 |
| BLD-02425 | West Building | 101 E. Valencia Mesa Dr. | Rebuild | SPC5 | 01/01/2020 | 12/01/2019 |
| BLD-02833 | Basement Expansion | 101 E. Valencia Mesa Dr. | Rebuild | SPC5 | 01/01/2020 | 12/01/2019 |

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per [Section 130061\(c\)\(1\)\(C\)](#). The projected construction start date or dates and projected Completion date or dates per [Section 130061\(c\)\(1\)\(D\)](#) and the most recent project status and approvals per [Section 130061\(c\)\(1\)\(E\)](#).

Building No: **BLD-02424** **Main Building / Canopies / Boiler Room** Retrofit/Replacement Project: **Yes-Submitted**

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Projected Start Date | Projected Completion Date | Status | CEQA Review |
|-----------------|----------------|---------|--|-----------|--------------------|----------------------|---------------------------|--------|-------------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 5/23/2008 | | 01/31/2011 | 12/20/2012 | CLOS | Yes |
| 10458 | IL102012-0 | 0 | MAIN HOSPITAL & WEST WING SPC-1 SEPARATION | 8/24/2010 | | 08/24/2010 | 06/30/2019 | ACTI | No |

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per [Section 130061\(c\)\(1\)\(C\)](#). The projected construction start date or dates and projected Completion date or dates per [Section 130061\(c\)\(1\)\(D\)](#) and the most recent project status and approvals per [Section 130061\(c\)\(1\)\(E\)](#).

Building No: **BLD-02425** **West Building** Retrofit/Replacement Project: **Yes-Submitted**

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Projected Start Date | Projected Completion Date | Status | CEQA Review |
|-----------------|----------------|---------|-----------------|-----------|--------------------|----------------------|---------------------------|--------|-------------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 5/23/2008 | | 01/31/2011 | 12/20/2012 | CLOS | Yes |

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per [Section 130061\(c\)\(1\)\(C\)](#). The projected construction start date or dates and projected Completion date or dates per [Section 130061\(c\)\(1\)\(D\)](#) and the most recent project status and approvals per [Section 130061\(c\)\(1\)\(E\)](#).

Building No:

BLD-02833

Basement Expansion

Retrofit/Replacement
Project:

No

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Projected Start Date | Projected Completion Date | Status | CEQA Review |
|--------------------|-------------------|------------|-------|-----------|-----------------------|-------------------------|------------------------------|--------|----------------|
| 10458 | IL081058-0 | 0 | | 5/23/2008 | | 01/31/2011 | 12/20/2012 | CLOS | Yes |

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-02424

Building Name: Main Building / Canopies / Boiler Room

Type of Service Provided

| | | | | |
|---|----------------|--------------------------------|----------------|--------------------------------|
| <input checked="" type="checkbox"/> Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> IntensiveCare | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Pediatric/Adol escent | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Psychiatric Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Intermediate Care | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Skilled Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |

Total Beds this Building

| | |
|--|---|
| <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Recovery |
| <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Newborn/ WellBaby |
| <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Nuclear Medicine |
| <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> Dietetic | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Outpatient Surgery |
| <input checked="" type="checkbox"/> Support Services | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input checked="" type="checkbox"/> Central Plant |

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-02425

Building Name: West Building

Type of Service Provided

| | | | | |
|---|----------------|--------------------------------|----------------|--------------------------------|
| <input checked="" type="checkbox"/> Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> IntensiveCare | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Pediatric/Adol escent | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Psychiatric Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Intermediate Care | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |
| <input type="checkbox"/> Skilled Nursing | Inpatient Beds | <input type="text" value="0"/> | Inpatient Days | <input type="text" value="0"/> |

Total Beds this Building

| | |
|---|---|
| <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Recovery |
| <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Newborn/ WellBaby |
| <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Emergency |
| <input checked="" type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Nuclear Medicine |
| <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> Dietetic | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Outpatient Surgery |
| <input checked="" type="checkbox"/> Support Services | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Cesarean/Deliv | |

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-02833

Building Name: Basement Expansion

Type of Service Provided

Nursing Inpatient Beds Inpatient Days

IntensiveCare Inpatient Beds Inpatient Days

Pediatric/Adol escent Inpatient Beds Inpatient Days

Psychiatric Nursing Inpatient Beds Inpatient Days

Obstetrical Ante/Postprtum Inpatient Beds Inpatient Days

Intermediate Care Inpatient Beds Inpatient Days

Skilled Nursing Inpatient Beds Inpatient Days

Total Beds this Building

Surgical Obstetrical Recovery

Anesthesia Newborn/ WellBaby

Clinical Lab Emergency

Radiological/ Imaging Nuclear Medicine

Pharmaceutical

Dietetic Rehabilitation Therapy

Administration Renal Dialysis

Support Services Outpatient Surgery

Obstetrical Cesarean/Deliv Central Plant

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: BLD-02424

Building Name: Main Building / Canopies / Boiler Room

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Provide the number of Inpatient beds and patient days per type of unit per building per [Section 130061\(c\)\(1\)\(F\)](#)

Building Number: BLD-02425

Building Name: West Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Provide the number of Inpatient beds and patient days per type of unit per building per [Section 130061\(c\)\(1\)\(F\)](#)

Building Number: BLD-02833

Building Name: Basement Expansion

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

| Building Number | Building Name | Building to be Removed / Replaced / Rebuilt |
|-----------------|--|---|
| BLD-02424 | Main Building / Canopies / Boiler Room | Rebuild |
| BLD-02425 | West Building | Rebuild |
| BLD-02426 | North Building | Remain |
| BLD-02427 | CT Scan Building | Remain |
| BLD-02428 | Outpatient/Admitting Building | Remain |
| BLD-02429 | Linear Accelerator | Remain |
| BLD-02431 | Emergency Generator Enclosure | Remain |
| BLD-02432 | MRI and Surgery Building | Remain |
| BLD-02832 | E.R. Waiting/Canopy | Remain |
| BLD-02833 | Basement Expansion | Rebuild |
| BLD-02834 | Boiler Room Expansion / Chiller Rm | Remain |
| BLD-03190 | Southwest Acute Care Bed Tower | Remain |
| BLD-03191 | Central Utility Plant | Remain |
| BLD-03192 | East Link | Remain |
| BLD-03193 | West Link North | Remain |
| BLD-03194 | Northwest Acute Care Bed Tower | Remain |
| BLD-05775 | West Link South | Remain |
| BLD-05776 | Trash Enclosure | Remain |
| BLD-05777 | Medical Gas Enclosure | Remain |
| BLD-05778 | Main Entrance Canopy | Remain |

No proposed new buildings to be constructed at this or another site.

For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(2\)\(C\)](#)

Building Number: BLD-02424

Main Building / Canopies / Boiler Room

Removal
Date:

12/01/2019

Planned Uses for the building to be removed from acute care service:

Planned use for building:

[Inpatient services currently delivered in the building:](#)

Nursing

Surgical

Obstetrical
Cesarean/DelivRehabilitation
Therapy

IntensiveCare

Anesthesia

Obstetrical
Recovery

Renal Dialysis

Pediatric/Adol
escent

Clinical Lab

Obstetrical
Recovery

Renal Dialysis

Psychiatric
NursingRadiological/
ImagingNewborn/
WellBabyOutpatient
SurgeryObstetrical
Ante/Postprtum

Pharmaceutical

Emergency

Central Plant

Intermediate
Care

Dietetic

Nuclear
MedicineSupport
Services

Skilled Nursing

Administration

For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(2\)\(C\)](#)

Building Number: BLD-02425

West Building

Removal
Date:

12/01/2019

Planned Uses for the building to be removed from acute care service:

Planned use for building:

[Inpatient services currently delivered in the building:](#)

- | | | | |
|--|--|--|---|
| <input checked="" type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | | |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Psychiatric Nursing | <input checked="" type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | <input type="checkbox"/> Nuclear Medicine | <input checked="" type="checkbox"/> Support Services |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per [Section 130061 \(c\)\(2\)\(A\)](#) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per [Section 130061\(c\)\(2\)\(B\)](#) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per [Section 130061\(c\)\(2\)\(C\)](#)

Building Number:

BLD-02833

Basement Expansion

Removal
Date:

12/01/2019

Planned Uses for the building to be removed from acute care service:

Planned use for building:

[Inpatient services currently delivered in the building:](#)

 Nursing

 IntensiveCare

 Pediatric/Adol
escent

 Psychiatric
Nursing

 Obstetrical
Ante/Postprtum

 Intermediate
Care

 Skilled Nursing

 Surgical

 Anesthesia

 Clinical Lab

 Radiological/
Imaging

 Pharmaceutical

 Dietetic

 Administration

 Obstetrical
Cesarean/Deliv

 Obstetrical
Recovery

 Newborn/
WellBaby

 Emergency

 Nuclear
Medicine

 Rehabilitation
Therapy

 Renal Dialysis

 Outpatient
Surgery

 Central Plant

 Support
Services

No data reported for Section 130061(c)(2)(D).

No data reported for Section 130061(c)(2)(D).

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number: Building Name:

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Start Date | Project Completed | Status |
|-----------------|----------------|---------|-----------------|------------|--------------------|------------|-------------------|--------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 2008-05-23 | | 05/23/2008 | 05/06/2014 | CLOS |

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number: Building Name:

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number: Building Name:

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number: BLD-02425 Building Name: West Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Nursing Relocated to new building

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Start Date | Project Completed | Status |
|-----------------|----------------|---------|-----------------|------------|--------------------|------------|-------------------|--------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 2008-05-23 | | 05/23/2008 | 05/06/2014 | CLOS |

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number: BLD-02425 Building Name: West Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Radiological/Imaging Relocated to new building

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Start Date | Project Completed | Status |
|-----------------|----------------|---------|-----------------|------------|--------------------|------------|-------------------|--------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 2008-05-23 | | 05/23/2008 | 05/06/2014 | CLOS |

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number:

BLD-02425

Building Name:

West Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Support Services

Relocated to new building

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Start Date | Project Completed | Status |
|-----------------|----------------|---------|-----------------|------------|--------------------|------------|-------------------|--------|
| 10458 | IL081058-0 | 0 | NORTHWEST TOWER | 2008-05-23 | | 05/23/2008 | 05/06/2014 | CLOS |

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per [Section 130061\(c\)\(2\)\(E\)](#)

Building Number:

BLD-02833

Building Name:

Basement Expansion

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

CentralPlant

Relocated to new building

| Facility Number | Project Number | Sub Num | Scope | Date In | Plan Approved Date | Start Date | Project Completed | Status |
|-----------------|----------------|---------|-----------------------|------------|--------------------|------------|-------------------|--------|
| 10458 | IL092368-0 | 0 | CENTRAL UTILITY PLANT | 2009-01-14 | | 01/14/2009 | 04/10/2014 | CLOS |

No data reported for Section 130061(c)(3).

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number: BLD-02424 Building Name: Main Building / Canopies / Boiler Room

Type of Service Provided

| | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input checked="" type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input checked="" type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number: BLD-02425

Building Name: West Building

Type of Service Provided

| | | | |
|--|--|--|---|
| <input checked="" type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input checked="" type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input checked="" type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per [Section 130061\(c\)\(4\)](#)

Building Number: BLD-02833 Building Name: Basement Expansion

Type of Service Provided

| | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input checked="" type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02424 Building Name: Main Building / Canopies / Boiler Room

Configuration: Remove from GAC service by 1/1/2030

Type of Service Provided

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02425

Building Name: West Building

Configuration: Remove from GAC service by 1/1/2030

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02426

Building Name: North Building

Configuration: Replace with existing SPC3, SPC4, SPC4D or SPC5 and NPC4 or NPC5 building.

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02427

Building Name: CT Scan Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number: BLD-02428

Building Name: Outpatient/Admitting Building

Configuration: [Retrofit Conforming building to NPC 4 or NPC 5](#)**Type of Service Provided** Nursing IntensiveCare Pediatric/Adolescent Psychiatric Nursing Obstetrical Ante/Postpartum Intermediate Care Skilled Nursing Surgical Anesthesia Clinical Lab Radiological/Imaging Pharmaceutical Dietetic Administration Obstetrical
Cesarean/Deliv Obstetrical
Recovery Newborn/
WellBaby Emergency Nuclear Medicine Rehabilitation
Therapy Renal Dialysis Outpatient
Surgery Central Plant Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02429

Building Name: Linear Accelerator

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adolescent

Psychiatric Nursing

Obstetrical Ante/Postpartum

Intermediate Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02431

Building Name: Emergency Generator Enclosure

Configuration: N/A

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adol escent
- Psychiatric Nursing
- Obstetrical Ante/Postprtum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/ Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/ WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02432

Building Name: MRI and Surgery Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adolescent
- Psychiatric Nursing
- Obstetrical Ante/Postpartum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02832

Building Name: E.R. Waiting/Canopy

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adolescent

Psychiatric Nursing

Obstetrical Ante/Postpartum

Intermediate Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02833

Building Name: Basement Expansion

Configuration: Remove from GAC service by 1/1/2030

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-02834

Building Name: Boiler Room Expansion / Chiller Rm

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number: BLD-03190

Building Name: Southwest Acute Care Bed Tower

Configuration: N/A

Type of Service Provided

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-03191

Building Name: Central Utility Plant

Configuration: N/A

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adol escent
- Psychiatric Nursing
- Obstetrical Ante/Postprtum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/ Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/ WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-03192

Building Name: East Link

Configuration: N/A

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-03193

Building Name: West Link North

Configuration: N/A

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-03194

Building Name: Northwest Acute Care Bed Tower

Configuration: N/A

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-05775

Building Name: West Link South

Configuration: N/A

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adol escent
- Psychiatric Nursing
- Obstetrical Ante/Postprtum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/ Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/ WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-05776

Building Name: Trash Enclosure

Configuration: N/A

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adolescent
- Psychiatric Nursing
- Obstetrical Ante/Postpartum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per [Section 130061\(c\)\(5\)](#)

Building Number: BLD-05777

Building Name: Medical Gas Enclosure

Configuration: N/A

Type of Service Provided

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Emergency |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Dietetic | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Administration | <input type="checkbox"/> Support Services | |
| <input type="checkbox"/> Skilled Nursing | | | |

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)

Building Number: BLD-05778

Building Name: Main Entrance Canopy

Configuration: N/A

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adol escent
- Psychiatric Nursing
- Obstetrical Ante/Postprtum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/ Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/ WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02426

Building Name: North Building

Type of Service Provided

Nursing Inpatient Beds 102

IntensiveCare Inpatient Beds 31

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 133

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02427

Building Name: CT Scan Building

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02428

Building Name: Outpatient/Admitting Building

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02429

Building Name: Linear Accelerator

Type of Service Provided

Nursing Inpatient Beds

IntensiveCare Inpatient Beds

Pediatric/Adolescent Inpatient Beds

Psychiatric Nursing Inpatient Beds

Obstetrical Ante/Postpartum Inpatient Beds

Intermediate Care Inpatient Beds

Skilled Nursing Inpatient Beds

Total Beds this Building

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02431

Building Name: Emergency Generator Enclosure

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02432

Building Name: MRI and Surgery Building

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02832

Building Name: E.R. Waiting/Canopy

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02834

Building Name: Boiler Room Expansion / Chiller Rm

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03190

Building Name: Southwest Acute Care Bed Tower

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 34

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 33

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 67

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03191

Building Name: Central Utility Plant

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03192

Building Name: East Link

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03193

Building Name: West Link North

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03194

Building Name: Northwest Acute Care Bed Tower

Type of Service Provided

- Nursing Inpatient Beds 120
- IntensiveCare Inpatient Beds 0
- Pediatric/Adolescent Inpatient Beds 0
- Psychiatric Nursing Inpatient Beds 0
- Obstetrical Ante/Postpartum Inpatient Beds 0
- Intermediate Care Inpatient Beds 0
- Skilled Nursing Inpatient Beds 0

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Obstetrical Recovery Renal Dialysis
- Clinical Lab Newborn/WellBaby Outpatient Surgery
- Radiological/Imaging Emergency Central Plant
- Pharmaceutical Nuclear Medicine Support Services
- Dietetic Administration

Total Beds this Building 120

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05775

Building Name: West Link South

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05776

Building Name: Trash Enclosure

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05777

Building Name: Medical Gas Enclosure

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05778

Building Name: Main Entrance Canopy

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adolescent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postpartum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per [Section 130061\(e\)](#)

Building Number: BLD-02426 Building Name: North Building

Medical / Surgical (Include GYN)

Inpatient Bed 72 Inpatient Days 13093

Acute Respiratory Care

Inpatient Bed 0 Inpatient Days 0

Acute Psychiatric

Inpatient Bed 0 Inpatient Days 0

Perinatal (Exclude Newborn / GYN)

Inpatient Bed 0 Inpatient Days 0

Burn

Inpatient Bed 0 Inpatient Days 0

Skilled Nursing

Inpatient Bed 0 Inpatient Days 0

Pediatric

Inpatient Bed 0 Inpatient Days 0

Intensive Care Newborn Nursery

Inpatient Bed 0 Inpatient Days 0

Intermediate Care

Inpatient Bed 0 Inpatient Days 0

Intensive Care

Inpatient Bed 31 Inpatient Days 6541

Rehabilitation Center

Inpatient Bed 30 Inpatient Days 7902

Int. Care / Developmentally Disabled

Inpatient Bed 0 Inpatient Days 0

Coronary Care

Inpatient Bed 0 Inpatient Days 0

Chemical Dependency

Inpatient Bed 0 Inpatient Days 0

Total Beds this Building Per Unit

133

Total Beds this Building Per Service

133

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02427 Building Name: CT Scan Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02428 Building Name: Outpatient/Admitting Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02429 Building Name: Linear Accelerator

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02431 Building Name: Emergency Generator Enclosure

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per [Section 130061\(e\)](#)

Building Number: BLD-02432 Building Name: MRI and Surgery Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit**Total Beds this Building Per Service**

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-02832 Building Name: E.R. Waiting/Canopy

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per [Section 130061\(e\)](#)

Building Number: BLD-02834

Building Name: Boiler Room Expansion / Chiller Rm

Medical / Surgical (Include GYN)Inpatient Bed Inpatient Days **Acute Respiratory Care**Inpatient Bed Inpatient Days **Acute Psychiatric**Inpatient Bed Inpatient Days **Perinatal (Exclude Newborn / GYN)**Inpatient Bed Inpatient Days **Burn**Inpatient Bed Inpatient Days **Skilled Nursing**Inpatient Bed Inpatient Days **Pediatric**Inpatient Bed Inpatient Days **Intensive Care Newborn Nursery**Inpatient Bed Inpatient Days **Intermediate Care**Inpatient Bed Inpatient Days **Intensive Care**Inpatient Bed Inpatient Days **Rehabilitation Center**Inpatient Bed Inpatient Days **Int. Care / Developmentally Disabled**Inpatient Bed Inpatient Days **Coronary Care**Inpatient Bed Inpatient Days **Chemical Dependency**Inpatient Bed Inpatient Days **Total Beds this Building Per Unit****Total Beds this Building Per Service**

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per [Section 130061\(e\)](#)

Building Number: BLD-03190 Building Name: Southwest Acute Care Bed Tower

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit**Total Beds this Building Per Service**

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03191 Building Name: Central Utility Plant

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03192 Building Name: East Link

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03193 Building Name: West Link North

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-03194 Building Name: Northwest Acute Care Bed Tower

Medical / Surgical (Include GYN)

Inpatient Bed 120 Inpatient Days 26523

Acute Respiratory Care

Inpatient Bed 0 Inpatient Days 0

Acute Psychiatric

Inpatient Bed 0 Inpatient Days 0

Perinatal (Exclude Newborn / GYN)

Inpatient Bed 0 Inpatient Days 0

Burn

Inpatient Bed 0 Inpatient Days 0

Skilled Nursing

Inpatient Bed 0 Inpatient Days 0

Pediatric

Inpatient Bed 0 Inpatient Days 0

Intensive Care Newborn Nursery

Inpatient Bed 0 Inpatient Days 0

Intermediate Care

Inpatient Bed 0 Inpatient Days 0

Intensive Care

Inpatient Bed 0 Inpatient Days 0

Rehabilitation Center

Inpatient Bed 0 Inpatient Days 0

Int. Care / Developmentally Disabled

Inpatient Bed 0 Inpatient Days 0

Coronary Care

Inpatient Bed 0 Inpatient Days 0

Chemical Dependency

Inpatient Bed 0 Inpatient Days 0

Total Beds this Building Per Unit

120

Total Beds this Building Per Service

120

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05775 Building Name: West Link South

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05776 Building Name: Trash Enclosure

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05777 Building Name: Medical Gas Enclosure

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

Building Number: BLD-05778 Building Name: Main Entrance Canopy

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service